Maine Weekly Influenza Surveillance Report

May 8, 2018

For MMWR week 18 (ending 5/5/2018)

Maine Center for Disease Control and Prevention
An Office of the Department of Health and Human Services

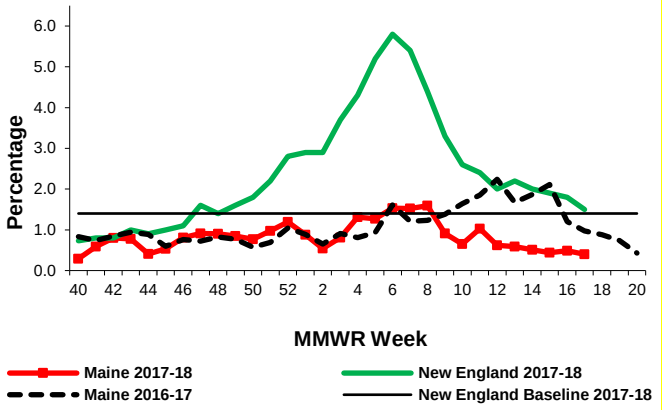
New This Week

- Federal Flu Code: Regional
- 8 new hospitalizations
- 1 new outbreak

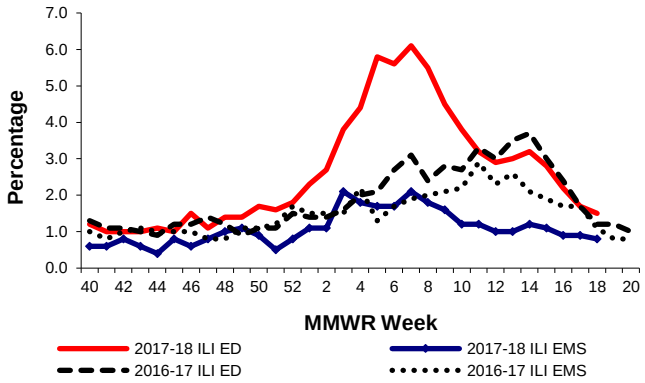
Surveillance Information – Maine, 2017-2018 Influenza Season

- Number of ILINet Providers reporting: 16 (Week 17 data, technical glitch for week 18)
  - % of visits for Influenza-Like Illness (ILI): 0.4 (Week 17 data, technical glitch for week 18)
- Syndromic Surveillance
  - % of Emergency Room visits for ILI: 1.5
  - % of Emergency Medical Services (EMS) runs for ILI: 0.8
- Influenza Hospitalizations
  - # of hospitalizations: 8
- Electronic Death Reporting System
  - % of deaths due to P&I: 7.2

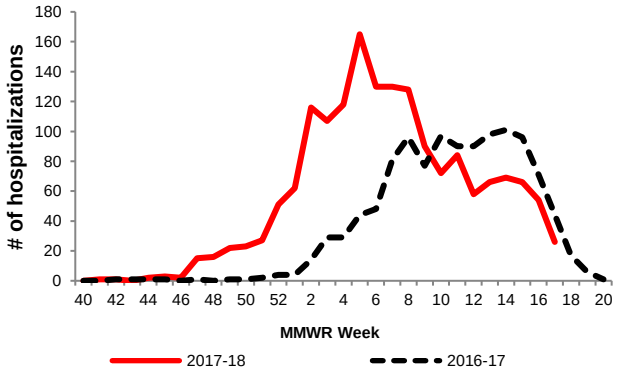
Outpatient Visits for ILI – Maine, 2016-18



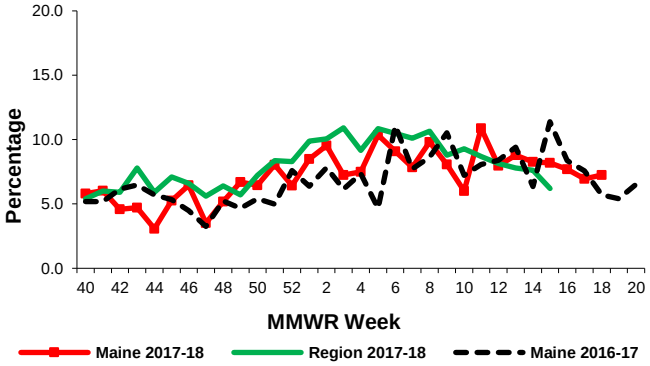
Syndromic Surveillance data for ILI – Maine, 2016 -18



Influenza Hospitalizations – Maine, 2016-18



Deaths Attributable to P&I – Maine, 2016-18

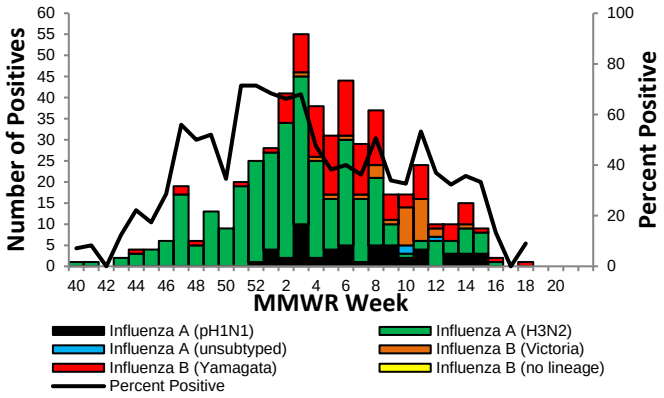


All data is preliminary and subject to change

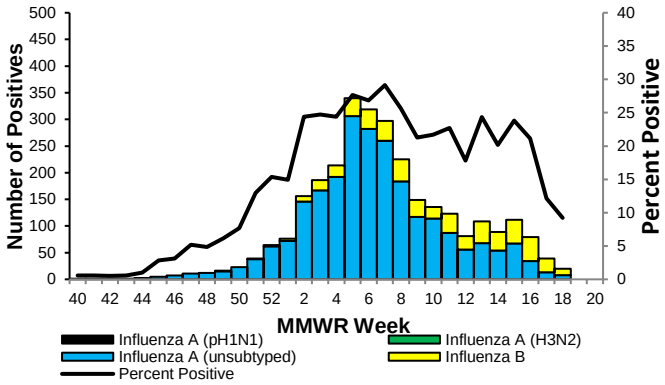
Lab Data – Maine, 2017-2018 Influenza Season

- # of samples tested at HETL: 11
  - # positive: 1
  - % positive: 9.1%
- # of samples tested at Maine Reference Labs: 217
  - # positive: 20
  - % positive: 9.2
- # of samples positive by rapid antigen test: 38

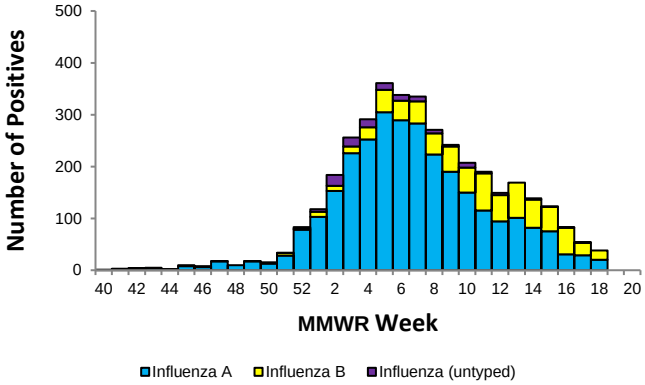
Positive PCR Samples for Influenza, HETL – Maine, 2017-18



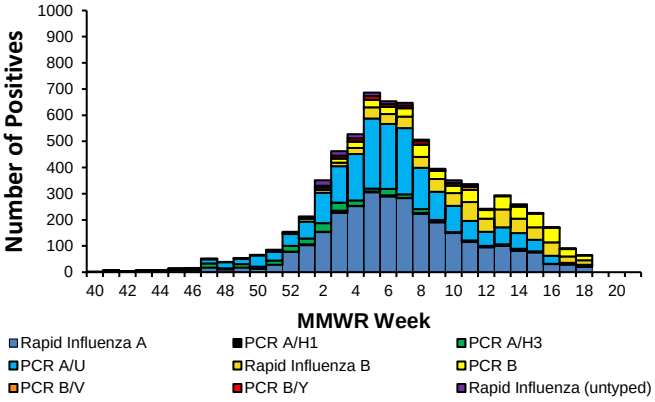
Positive Samples for Influenza, Maine Reference Labs – Maine, 2017-18



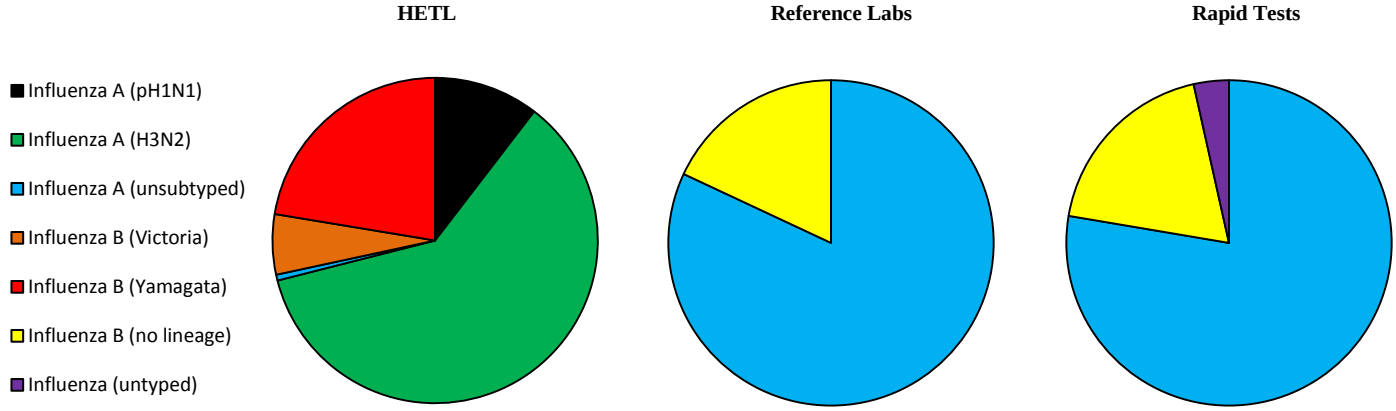
Positive Influenza Rapid Antigen Tests – Maine, 2017-18



All Positive Influenza Results – Maine 2017-18



Cumulative Influenza Positive Tests Reported to Maine CDC by Strain and Test Type



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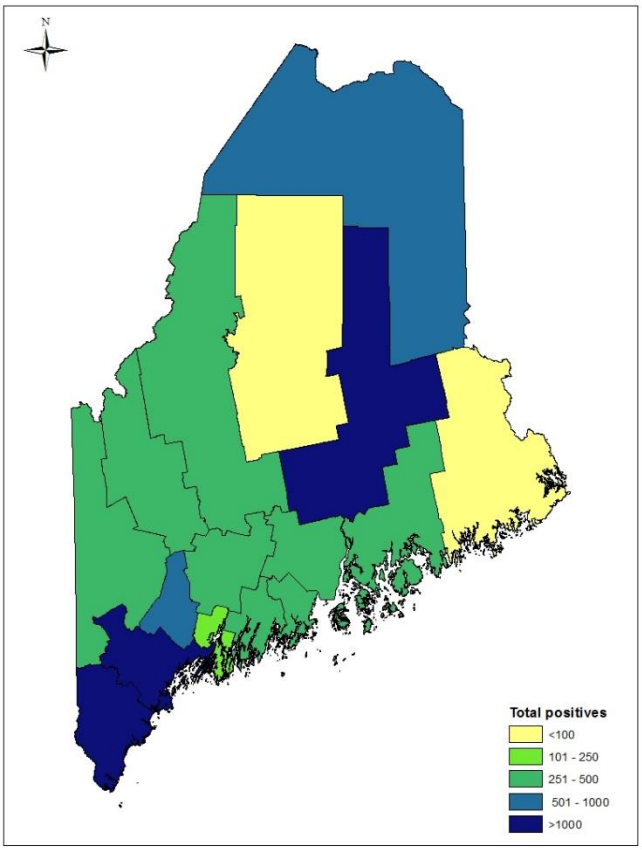
Geographic Distribution of Lab Tests, Maine 2017-18*

County	Positive labs		Hospitalizations	
	Tested this week	Total	New this week	Total
Androscoggin	13	788	1	114
Aroostook	17	690	0	27
Cumberland	9	1311	0	331
Franklin	4	234	0	11
Hancock	3	317	0	62
Kennebec	9	495	0	67
Knox	1	307	1	147
Lincoln	0	227	0	100
Oxford	2	404	0	137
Penobscot	15	1399	2	189
Piscataquis	0	54	0	6
Sagadahoc	1	136	0	40
Somerset	9	406	0	53
Waldo	2	262	0	105
Washington	0	77	0	24
York	14	1781	4	299
Total	**99**	**8888**	**8**	**1712**

*Only reported PCR, culture, and rapid antigen tests are included in the chart and map.

Positive Influenza Tests, Maine 2017-18



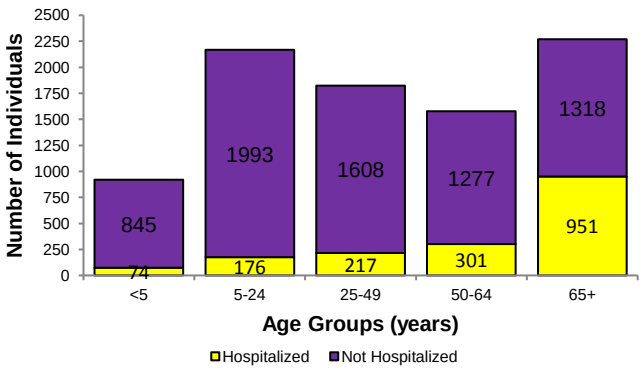
Antiviral Resistance – Maine, 2017-18 Influenza Season

- # of Influenza A (pH1N1) samples tested for Tamiflu resistance at HETL: 31
  - # with resistance: 0
- # of Influenza A (H3) samples tested for Tamiflu resistance at HETL: 180
  - # with resistance: 0

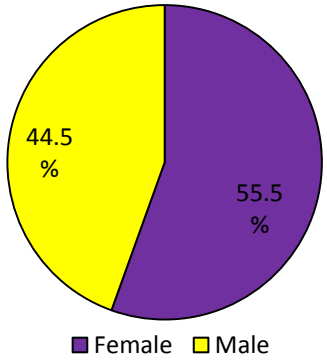
Age and Gender Information – Maine, 2017-18 Influenza Season

- Minimum Age: 5 days
- Mean Age: 41 years
- Maximum Age: 103 years
- Hospitalized Minimum Age: 5 days
- Hospitalized Mean Age: 60 years
- Hospitalized Maximum Age: 103 years

Positive Influenza Tests by Age – Maine, 2017-18



Positive Influenza Tests by Gender – Maine, 2017-18



All data is preliminary and subject to change

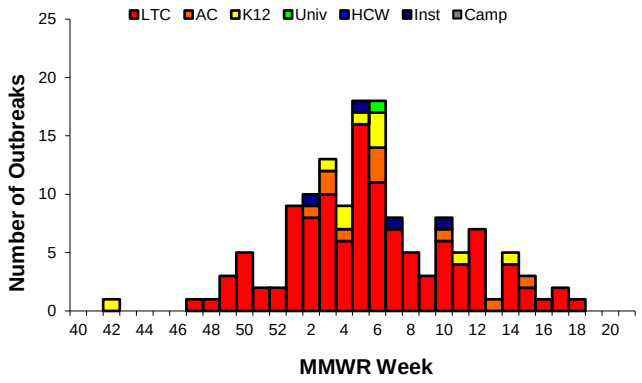
Antigenic Characterization (Vaccine Strain Match)

- Federal CDC has antigenically or genetically characterized 2,777 influenza viruses from October 1 – April 21, 2018.
    - 100% of influenza A/H1N1 samples match the vaccine strain
    - 96.6% of influenza A/H3N2 samples match the vaccine strain
    - 24.4% of influenza B/Victoria samples match the vaccine strain
    - 100% of influenza B/Yamagata samples match the vaccine strain
- Antigenic characterization shows if the circulating strains are the same strains that were used to make the vaccine. This does not tell you how effective the vaccine is at creating an immune response. For current vaccine effectiveness rates visit https://www.cdc.gov/mmwr/volumes/67/wr/mm6706a2.htm.

Influenza-Like Illness Outbreaks – Maine, 2017-18 Influenza Season

- # new outbreaks: 1
- Total outbreaks 2017-18 season: 141

Influenza-Like Illness Outbreaks by Facility Type – Maine, 2017-18



Outbreak Facility Type Key:

LTC - Long Term Care Facility
AC - Acute Care Facility (nosocomial)
K12 - School (K-12) or daycare
Univ - School (residential) or University
HCW - Health care workers
Inst - Other institutions (workplaces, correctional facilities etc)
Camp - Camp

Influenza-Like Illness Outbreak by Facility Type and County – Maine, 2017-18

County	LTC	AC	K12	Univ	HCW	Inst	Camp	Total
Androscoggin	7	3	2	0	0	0	0	12
Aroostook	5	1	0	1	0	0	0	7
Cumberland	30	3	1	0	0	0	0	34
Franklin	1	0	0	0	0	0	0	1
Hancock	2	0	0	0	0	0	0	2
Kennebec	8	1	2	0	0	0	0	11
Knox	5	1	0	0	0	3	0	9
Lincoln	2	0	0	0	0	0	0	2
Oxford	7	0	1	0	0	0	0	8
Penobscot	15	0	0	0	0	1	0	15
Piscataquis	0	0	0	0	0	0	0	0
Sagadahoc	4	0	0	0	0	0	0	4
Somerset	4	0	2	0	0	0	0	6
Waldo	0	0	0	0	0	0	0	0
Washington	4	0	0	0	0	0	0	4
York	22	1	2	0	0	0	0	25
Total	**116**	**10**	**10**	**1**	**0**	**4**	**0**	**141**

Influenza Deaths
This number represents the number of individuals who had influenza specifically listed on their death certificate. This is likely an underrepresentation of the true burden as many influenza-associated deaths are due to secondary infections which is why the Pneumonia and Influenza (P&I) death information is on page 1 of this report.

- # deaths reported this week: 2
- Total influenza deaths 2017-18 season: 82

Pediatric Influenza Deaths

- No pediatric influenza-associated deaths reported in Maine during the 2017-18 influenza season

National Influenza Surveillance Data
Source: http://www.cdc.gov/flu/weekly/

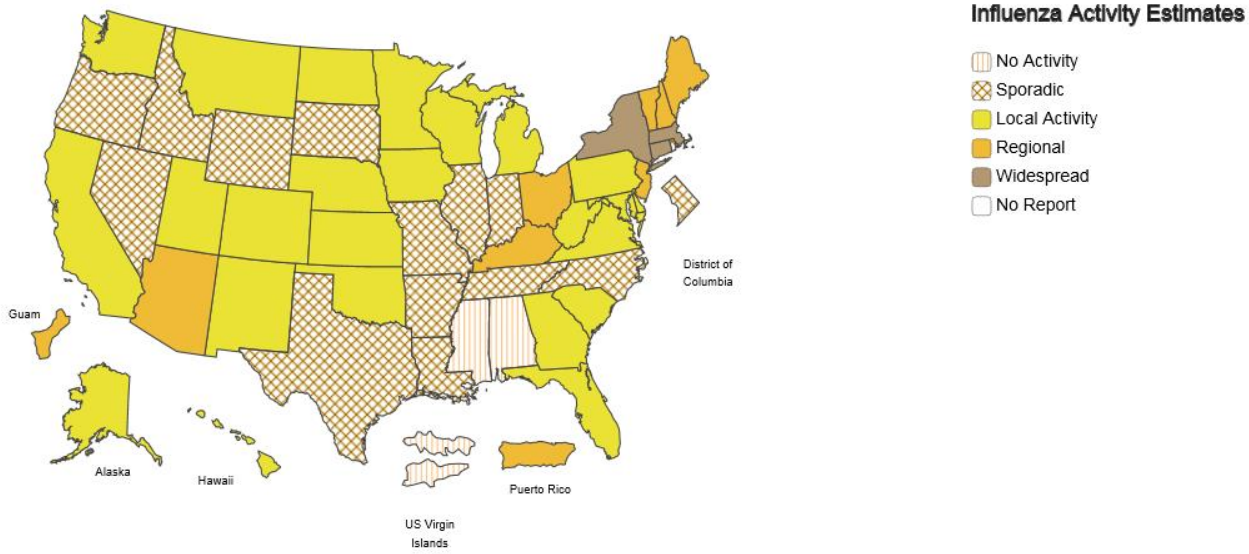
FLUVIEW

CDC

A Weekly Influenza Surveillance Report Prepared by the Influenza Division

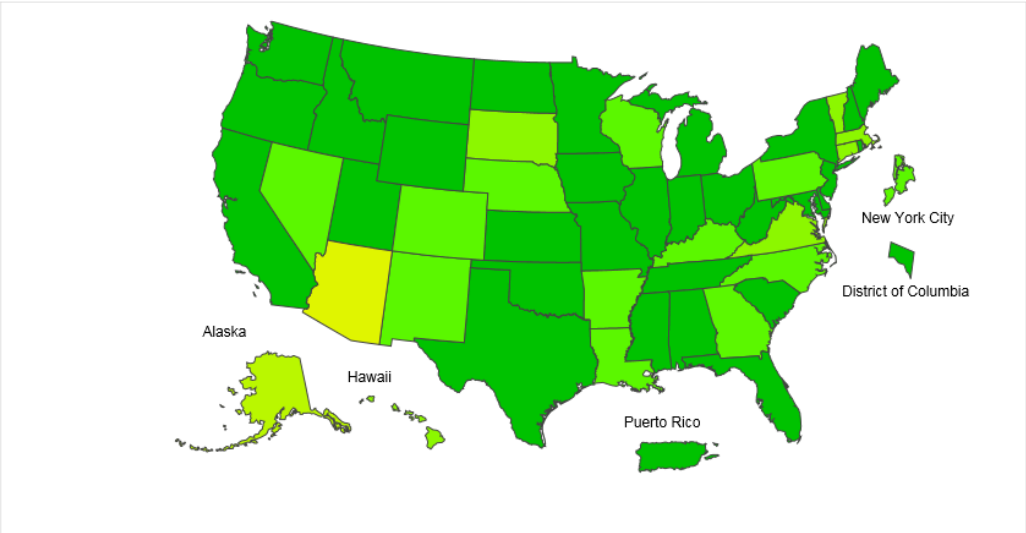
Weekly Influenza Activity Estimates Reported by State and Territorial Epidemiologists*

Week Ending Apr 28, 2018 - Week 17



*This map indicates geographic spread and does not measure the severity of influenza activity.

2017-18 Influenza Season Week 17 ending Apr 28, 2018



*This map uses the proportion of outpatient visits to healthcare providers for influenza-like illness to measure the ILI activity level within a state. It does not, however, measure the extent of geographic spread of flu within a state. Therefore, outbreaks occurring in a single city could cause the state to display high activity levels.
*Data collected in ILINet may disproportionately represent certain populations within a state, and therefore may not accurately depict the full picture of influenza activity for the whole state.
*Data displayed in this map are based on data collected in ILINet, whereas the State and Territorial flu activity map are based on reports from state and territorial epidemiologists. The data presented in this map is preliminary and may change as more data is received.
*Differences in the data presented by CDC and state health departments likely represent differing levels of data completeness with data presented by the state likely being the more complete.
*For the data download you can use Activity Level for the number and Activity Level Label for the text description.